

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 56

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Academy of Otolaryngology-Head and Neck Surgery ENT PAC

A.

Full Name (Last, First, Middle Initial)

John R. Houck, MD

Mailing Address Dept Of OTO
PO Box 26901 WP 1290

City State Zip Code
Oklahoma City OK 73126-0901

FEC ID number of contributing
federal political committee.

C

Name of Employer
Univ of Oklahoma

Occupation
Associate Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 4 / 2 0 1 0

Transaction ID: C894845

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

P David Hunter, MD

Mailing Address 535 NW 9th St Ste 300

City State Zip Code
Oklahoma City OK 73102-1006

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hunter & Clark PC

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 3 / 2 0 1 0

Transaction ID: C894806

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Joseph Hutchison, MD

Mailing Address 2321 Atherholt Rd

City State Zip Code
Lynchburg VA 24501-2113

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 7 / 2 0 1 0

Transaction ID: C903927

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)